

**The Palakkad Dist. Police Department Employees Co-op. Society
Ltd., No. P. 1021, Palakkad**

RECURRING DEPOSIT APPLICATION FORM

1. Name and Particulars ---
2. Member No. ---
3. Residential Address ---
4. Date of birth ---
5. Amount-in figures and words ---
6. Term ---
7. Person to whom the deposit
Should be returned in the event of
the depositors death } a) Name & relationship
b) Father's Name
c) Residential address

8. Specimen Signature 1
- 2
- 3

I have read the rules in respect of account and I her by undertake to abide by them
and by their amendments

Place :

Date : Signature of Applicant

FOR OFFICE USE ONLY

Accepted/ Rejected

Account No. allotted

Date.....Term.....Amount.....

Monthly instalment.....

Secretary